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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

Governmental Ethics Commission  
901 S. Kansas Avenue  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[ethics.kansas.gov](http://ethics.kansas.gov)

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

**Candidate** Candidate Name: **LeSean Tarkington**  
Address: **PO Box 20934**  
Address2:  
City: **Wichita** Zip: **67208**  
Home Phone: **(316) 636-7731** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **cliftonhill6251@yahoo.com**  
Office Sought: **State Representative** District No.: **89**

**Treasurer** Date Appointed: **04/12/2018**  
Treasurer Name: **Cornell Hill**  
Address: **5217 E 20th St. N**  
Address2:  
City: **Wichita** State: **KS** Zip: **67208**  
Home Telephone: **(316) 200-9899** Business Phone: Cell Phone:  
Email Address: **cliftonhill6251@yahoo.com**

**Candidate** Date Appointed:  
**Committee** Chairperson's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

Date Appointed:  
Treasurer's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:

Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **7/26/2018 3:36:14 PM** Signature of Candidate: **Cornell C Hill**

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This is an (Check one) ☒ **Initial Appointment**

**Amended Statement**

**Candidate** Candidate Name: **LeSean Tarkington**  
Address: **2750 N Hillside**  
Address2:  
City: **Wichita** Zip: **67219**  
Home Phone: **(316) 636-7731** Business Phone: Cell Phone:  
County: **Sedgwick** Email Address: **cliftonhill6251@yahoo.com**  
Office Sought: **State Representative** District No.: **89**

**Treasurer** Date Appointed: **04/12/2018**  
Treasurer Name: **Cornell Hill**  
Address: **5217 E 20th St. N**  
Address2:  
City: **Wichita** State: **KS** Zip: **67208**  
Home Telephone: **(316) 200-9899** Business Phone: Cell Phone:  
Email Address: **cliftonhill6251@yahoo.com**

**Candidate** Date Appointed:  
**Committee** Chairperson's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

Date Appointed:  
Treasurer's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:

Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **7/9/2018 2:28:34 PM** Signature of Candidate: **LeSean Tarkington**

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**APPOINTMENT OF  
TREASURER OR CANDIDATE COMMITTEE FORM  
FOR CANDIDATE FOR STATE OFFICE**

**RECEIVED**

**APR 12 2018**

**KRIS W. KOBACH  
SECRETARY OF STATE**

This is an (Check one)



Initial Appointment



Amended Statement

**CANDIDATE**

(Please Type or Print)

Name LeSean Tarkington		
Street 2750 N Hillside		
City Wichita	County Sedgwick	Zip Code 67219
Home Telephone 3166367731	Business Telephone	
Office Sought State Representative	District No. 89	

**TREASURER**

Date Appointed 4/4/2018	
Name Cornell C. Hill	
Address 5217 E. 20th St. N.	
City Wichita	Zip Code 67208
Home Telephone 316-200-9899	Business Telephone

**OR CANDIDATE COMMITTEE**

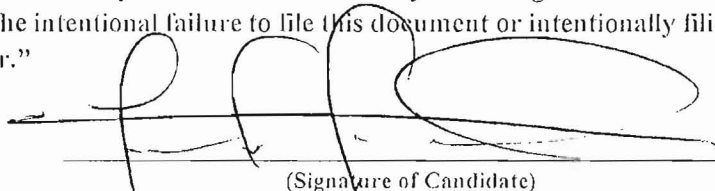
Date Appointed	
Chairperson's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone
Treasurer's Name	
Address	
City	Zip Code
Home Telephone	Business Telephone

**SIGNATURE**

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

04/4/18

(Date)



(Signature of Candidate)

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